

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.

10674037

FILING DATE

9-30-03

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5	1					
6		1				
7		1				
8		2				
9		1				
10	1					
11		1				
12		1				
13		1				
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49						
50						
TOTAL IND.	3					
TOTAL DEP.	11					
TOTAL CLAIMS	14					

	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.						
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TOTAL CLAIMS						